

NOV 25 2019

UNITED STATES DISTRICT COURT

for the

Western District of Texas

Midland Divisional Office

CLERK, U.S. DISTRICT COURT
WESTERN DISTRICT OF TEXAS
BY [Signature]
DEPUTY CLERK

Luis Angel Rojo

Case No.

4:19-cv-70-DC

(to be filled in by the Clerk's Office)

*Plaintiff(s)**(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)*

-v-

Rolling Plains Facility : La Salle Detention Center

*Defendant(s)**(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names. Do not include addresses here.)*

COMPLAINT FOR VIOLATION OF CIVIL RIGHTS

(Prisoner Complaint)

NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed in forma pauperis.

I. The Parties to This Complaint**A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	Luis Angel Rojo Mendoza		
All other names by which you have been known:			
ID Number	24279-480		
Current Institution	Reeves County Detention Center RIII		
Address	P.O. Box 2038		
	Pecos	TX	79772
	<i>City</i>	<i>State</i>	<i>Zip Code</i>

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. Make sure that the defendant(s) listed below are identical to those contained in the above caption. For an individual defendant, include the person's job or title (*if known*) and check whether you are bringing this complaint against them in their individual capacity or official capacity, or both. Attach additional pages if needed.

Defendant No. 1

Name	Mr. Villegas		
Job or Title (<i>if known</i>)	Warden		
Shield Number			
Employer	Rolling Plains Facility		
Address	118 County Rd 206 P.O. Box 847		
	Haskell	TX	79521
	<i>City</i>	<i>State</i>	<i>Zip Code</i>
<input checked="" type="checkbox"/> Individual capacity <input type="checkbox"/> Official capacity			

Defendant No. 2

Name			
Job or Title (<i>if known</i>)			
Shield Number			
Employer			
Address			
	<i>City</i>	<i>State</i>	<i>Zip Code</i>
<input type="checkbox"/> Individual capacity <input type="checkbox"/> Official capacity			

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Defendant No. 3

Name

Job or Title (if known)

Shield Number

Employer

Address

City

State

Zip Code

☐

Individual capacity

☐

Official capacity

Defendant No. 4

Name

Job or Title (if known)

Shield Number

Employer

Address

City

State

Zip Code

☐

Individual capacity

☐

Official capacity

II. Basis for Jurisdiction

Under 42 U.S.C. § 1983, you may sue state or local officials for the “deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws].” Under *Bivens v. Six Unknown Named Agents of Federal Bureau of Narcotics*, 403 U.S. 388 (1971), you may sue federal officials for the violation of certain constitutional rights.

A. Are you bringing suit against (check all that apply):

☒

Federal officials (a *Bivens* claim)

☐

State or local officials (a § 1983 claim)

B. Section 1983 allows claims alleging the “deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws].” 42 U.S.C. § 1983. If you are suing under section 1983, what federal constitutional or statutory right(s) do you claim is/are being violated by state or local officials?

C. Plaintiffs suing under *Bivens* may only recover for the violation of certain constitutional rights. If you are suing under *Bivens*, what constitutional right(s) do you claim is/are being violated by federal officials?

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8th Amendment of the U.S. Constitution which is clear violation of the cruel and unusual punishment and equal protection clause.

11th Amendment of the U.S. Constitution, which is clear violation of my right to be free of any cruel and unusual punishment and the lack of proper medical attention clause.

- D. Section 1983 allows defendants to be found liable only when they have acted "under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia." 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under *Bivens*, explain how each defendant acted under color of federal law. Attach additional pages if needed.

III. Prisoner Status

Indicate whether you are a prisoner or other confined person as follows (*check all that apply*):

- ☐ Pretrial detainee
- ☐ Civilly committed detainee
- ☐ Immigration detainee
- ☐ Convicted and sentenced state prisoner
- ☒ Convicted and sentenced federal prisoner
- ☐ Other (*explain*) _____

IV. Statement of Claim

State as briefly as possible the facts of your case. Describe how each defendant was personally involved in the alleged wrongful action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

- A. If the events giving rise to your claim arose outside an institution, describe where and when they arose. Rolling Plains Facility Warden Mr. Villegas because on July 3, 2019 in Haskell, Texas, I was assaulted by another inmate who was intoxicated and I didn't receive the proper medical attention for my injuries at the moment when it occurred.

- B. If the events giving rise to your claim arose in an institution, describe where and when they arose.

C. What date and approximate time did the events giving rise to your claim(s) occur?
July 3, 2019

Between 6-9pm

D. What are the facts underlying your claim(s)? (For example: What happened to you? Who did what? Was anyone else involved? Who else saw what happened?)
Assaulted by an inmate who was intoxicated and with no reason, knocked me down and received multiple facial injuries. Moments later, it happened to another inmate who was assaulted by the same inmate and received broken ribs. The inmates who witnessed these moments were Robert Nunez, Rafael Munoz, Daniel Ramos and Juan de Dios Saucedo. 10 more inmates who were housed in the same unit were witnesses.

V. Injuries

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive.
Fractures on my left cheekbone, broken teeth (Molar) on my upper left side which I had pulled out, my front teeth are not in its proper place and are moved towards the front. Another thing the x-rays didn't show is the pain and discomfort on my left shoulder I endured from the assault.

VI. Relief

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.
Hold those responsible for my injuries, pain, and suffering. To also be compensated for all the pain and suffering I endured for the lack of interest of my well being and negligence of the medical staff. For all these reasons including attorney fees and court costs, I'm claiming to be compensated for two millions dollars. (\$2,000,000.00)

VII. Exhaustion of Administrative Remedies Administrative Procedures

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted."

Administrative remedies are also known as grievance procedures. Your case may be dismissed if you have not exhausted your administrative remedies.

A. Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?

☒ Yes

☐ No

If yes, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).
Rolling Plains Facility "La Salle" Detention Center

B. Does the jail, prison, or other correctional facility where your claim(s) arose have a grievance procedure?

☐ Yes

☐ No

☒ Do not know

C. Does the grievance procedure at the jail, prison, or other correctional facility where your claim(s) arose cover some or all of your claims?

☐ Yes

☐ No

☒ Do not know

If yes, which claim(s)?

- D. Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose concerning the facts relating to this complaint?

☒ Yes

☐ No

If no, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?

☒ Yes

☐ No

- E. If you did file a grievance:

1. Where did you file the grievance?
Reeves County Detention Center RIII P.O. Box 2038
Pecos, Texas 79772

-
2. What did you claim in your grievance?
Cheekbone fractures, broken molar, disaligned front teeth, suffering shoulder, headaches, pains and dizziness.

-
3. What was the result, if any?
All injuries and pain endured were all results and consequences of the assault.

-
4. What steps, if any, did you take to appeal that decision? Is the grievance process completed? If not, explain why not. *(Describe all efforts to appeal to the highest level of the grievance process.)* All my efforts to alleviate my injuries and issues were ignored and threatened to be on disciplinary write up.
-

F. If you did not file a grievance:

1. If there are any reasons why you did not file a grievance, state them here:
I was ignored and threatened by medical and staff.

-
2. If you did not file a grievance but you did inform officials of your claim, state who you informed, when and how, and their response, if any:

G. Please set forth any additional information that is relevant to the exhaustion of your administrative remedies.
None were given.

(Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.)

VIII. Previous Lawsuits

The “three strikes rule” bars a prisoner from bringing a civil action or an appeal in federal court without paying the filing fee if that prisoner has “on three or more prior occasions, while incarcerated or detained in any facility, brought an action or appeal in a court of the United States that was dismissed on the grounds that it is frivolous, malicious, or fails to state a claim upon which relief may be granted, unless the prisoner is under imminent danger of serious physical injury.” 28 U.S.C. § 1915(g).

To the best of your knowledge, have you had a case dismissed based on this “three strikes rule”?

☐ Yes

☒ No

If yes, state which court dismissed your case, when this occurred, and attach a copy of the order if possible.

A. Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?

☐ Yes

☒ No

B. If your answer to A is yes, describe each lawsuit by answering questions 1 through 7 below. *(If there is more than one lawsuit, describe the additional lawsuits on another page, using the same format.)*

1. Parties to the previous lawsuit

Plaintiff(s) _____

Defendant(s) _____

2. Court *(if federal court, name the district; if state court, name the county and State)*

3. Docket or index number

4. Name of Judge assigned to your case

5. Approximate date of filing lawsuit

6. Is the case still pending?

☐ Yes

☐ No

If no, give the approximate date of disposition. _____

7. What was the result of the case? *(For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)*

C. Have you filed other lawsuits in state or federal court otherwise relating to the conditions of your imprisonment?

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☐ Yes

☒ No

D. If your answer to C is yes, describe each lawsuit by answering questions 1 through 7 below. *(If there is more than one lawsuit, describe the additional lawsuits on another page, using the same format.)*

1. Parties to the previous lawsuit

Plaintiff(s) _____

Defendant(s) _____

2. Court *(if federal court, name the district; if state court, name the county and State)*

3. Docket or index number

4. Name of Judge assigned to your case

5. Approximate date of filing lawsuit

6. Is the case still pending?

☐ Yes

☐ No

If no, give the approximate date of disposition _____

7. What was the result of the case? *(For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)*

IX. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: _____

Signature of Plaintiff

Printed Name of Plaintiff

Prison Identification #

Prison Address

Luis A Rojo-Mendoza

Luis Angel Rojo Mendoza

24279-480

P.O. Box 2038

Pecos

City

Texas

State

79772

Zip Code

B. For Attorneys

Date of signing: _____

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

Address

City

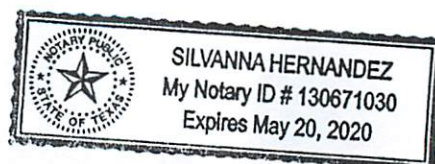
State

Zip Code

Telephone Number

E-mail Address

Silvana Hernandez



Luis Angel Rojo Mendoza

ID #: 2019011225

Booking #: 201901138

On July 3rd, 2019, I was a victim of an assault by another inmate that goes by the name of Victor Valley. Victor was intoxicated and with no reason, knocked me down at the Rolling Plains Facility. The wardens name is Mr. Villegas in La Salle Detention Haskell, Texas. Due to the injury's sustained during the assault, I was required 6 stitches on my face and endured excruciating pain due to the fact I was not given proper medical attention. On July 18, 2019, I was transferred to Reeves County Detention Center R2 in Pecos, Texas where (S.I.S) Mr. Rodriguez put me on the list to have x-rays done on my face that were done on August of 2019 and found nothing wrong, or so they claim. I'm still unable to eat solid foods due to the pain I'm suffering.

On September 13, 2019, I requested to get a second opinion, so I was taken to an outside dental and re-constructive facial clinic in Midland, Texas, in which Dr. Rajesh Gutta found fractures on my left cheekbone, broken molar, and misaligned teeth. Dr. Rajesh wondered why I had not received any medical attention for my injuries to which, I explained that I had been trying to do so, but was told there was nothing wrong and ignored my request for medical attention. Officer Mr. Avila and officer Mr. Benson witnessed what Dr. Gutta said about why I was not getting the medical attention I needed.

I thank God my injuries have almost healed by themselves as I managed a lot of pain, sleepless and restless days and nights. I still have to deal with pain, some

days are worse than others. Some medication like: Tylenol and Ibuprofen have helped a little to bare some of the pain.

What I'm looking for is justice and for things to be set right, of course, everything to be done according by the law, which clearly violates the cruel and unusual punishment clause. 8th Amendment of the U.S Constitution, and equal protection clause. The 11th Amendment as well, which is clear violation of my right to be free of any cruel and unusual punishment, and the lack of proper medical attention are clear results to my pain and suffering.

Please, do not let this issue go unnoticed and unattended and be forgotten about. I can assure you that my mind and body are going to remember this for a very long time because of the unfortunate and uncalled for situation. The headaches, pain, and dizziness will be my constant reminders of this.

Nevertheless, the officers made another mistake by letting go Victor Valles go back into the unit to collect his personal belongings, then got into another fight with another inmate named Ramon Rodriguez, who was sent to the hospital with broken ribs and multiple injuries. The whole situation was caught on security cameras at the Rolling Plains Facility.

Luis Angel Ego Mendoza
B.O.# 24279-480
E.C.D.C R3
P.O Box 2038
Pecos, Texas 79772



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